FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

· 如果,我们就是我们,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们也是一个人的,我们就是一个人的,我们就是一个人的,我们也会

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Apr 25 1997 8:00am

Secretary of State

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Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000011498 (9)

L.A. DEVELOPMENT CORPORATION

Principal Place of Business Mailing Address					1 IEDI(D\$) [\$1 IBIB\ B) 00 40 60	08/01 100 119 1 0 0 0	9181 1811 1984
7900 NW 36TH ST 7900 NW 36TH ST							
2ND FL Miami FL 3310	00	2ND FL Miami FL 33166-6804					
MINNI LF 2310	00	MIRMI FE 33100-0004			3. Date Incorporated or Qualified	3a. Date of Last	Report
					02/10/1995	02/05/1996	
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	<u> </u>	Applied For
21		26			65-0554490 Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Dosired S8.75 Additional		
City & State		Cdu P State	City & State		Fee Required		
23		h 1	28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip Country		7(p)	Country		Trust Fund Contribution LJ Added to Fees 8. This corporation has liability for intangible tax under s. 199.032.		
24	25	29	30		Florida Statutes Yes No		
	9. Name and Address of Curr		1441		10. Name and Address of New Reg		
ARI	AS, LUIS		В	1 Name			
	o NW 36TH ST		8	2 Street Add	dress (P.O. Box Number is Not Acceptab	e)	
MIA	MI FL 33166		[
			8	3			
			8	4 City		85 Zij	p Code
44 5				<u></u>			
office or r	registered agent, or both, in the Sta	te of Florida. Such change was	: authorized l	by the corpora	rporation submits this statement for the partion's board of directors. I hereby accep	urpose of changing t the appointment a	its registered as registered
agent. I a	im familiar with, and accept the obt	igations of, Section 607.0505, F	lorida Statut	es.	,	.,	J
SIGNATURE	Signature, typed or printed name of registered	errent sout tille dispositions and tille	STE: Providence A	uent sanat re rece	uired when reinstating)	DATE	
12. OFFICERS AND DIRECTORS			13,		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	DELETE	1.1 10 LE			Change	
NAME	ARIAS, LUIS		1.2 NAM	<u> </u>			
STREET ADDRESS	7900 NW 36TH ST		1.3 STREET ADDRESS				
CITY-\$T-ZIP	MIAMI FL 33166		1,4 C(1)	- S1 - 2IP			
TITLE		☐ DELETE	21711LE			☐ Change	Addition
NAME			2 2 NAM				
STREET ADDRESS	S		2.3 STRE	FT ADDRESS			
CITY-ST-ZIP	10.10	- Burir	2. 4 CITY				
TITLE NAME	DELETE		3.1 TITLE	i			Addition
STREET ADDRESS			3.2 NAMI				
				I ADORESS			
CITY+ST+ZIP TITLE	L_ DELETE		3.4. CITY 4.1 TITLE			Change	Addition
NAME			4.2 NAME			onanga	2,100,101
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			4.4 CHY				
TITLE						☐ Change	Addition
NAME			5.2 NAMI				
STREET ADDRESS			5 3 STRE	1 ADDRESS			
CITY-ST-ZIP	<u> </u>		54 CITY	-ST - ZIP			
TITLE		DELETE	6 1 117LE			Change	Addition
NAME			6.2 NAME				
ATRECT ARROTOR	,						I

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation of the receivery trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter, or on an attachment with an address.

6.4 CITY-ST-ZIP